

L14 000168643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

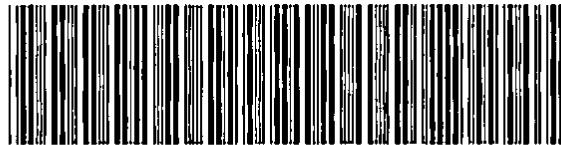
(Business Entity Name)

(Document Number)

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19 AUG -9 AM 10:03

RECEIVED  
DIVISION OF CORPORATION

08/23/19--01006--004 \*\*60.00

07/24/19--01001--002 \*\*25.00

LLC RA Resign

08-12-19

DC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 29, 2019

MICHAEL A. SCHNELL, CPA  
238 PONTE VEDRA PARK DR SUITE 201  
PONTE VEDRA BEACH, FL 32082

SUBJECT: THE CARD COLLABORATIVE INTERNATIONAL, LLC  
Ref. Number: L14000168643

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$60.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

A registered agent resignation on an active llc is a \$85 filing fee. If you choose not to pay the additional \$60 to file the resignation, you will remain the registered agent. You may refuse to accept service of process should you be serviced and the process server will notify our office and let us know that you refused to be served and we will notify the LLC. We will ask them to obtain a new registered agent and file the paperwork with our office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 319A00015367

2019 AUG -9 PM 12:06  
RECEIVED  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 25, 2019

THE CARD COLLABORATIVE INTERNATIONAL, LLC  
238 PONTE VEDRA PARK DR SUITE 201  
PONTE VEDRA BEACH, FL 32082

SUBJECT: THE CARD COLLABORATIVE INTERNATIONAL, LLC  
Ref. Number: L14000168643

We have received your document for THE CARD COLLABORATIVE INTERNATIONAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$60.00.

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 519A00013621



June 12, 2019

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Attachment to Registered Agent Withdraw  
RE: The Card Collaborative International, LLC  
Document Number: L14000168643

Dear Sir/Madam:

This letter is to notify the state that the 2019 annual report filed for The Card Collaborative International, LLC was fraudulently filed and signed. Pivot CPA's never agreed to be the registered agent for the business and Michael A. Schnell did not electronically sign the report.

Given that this form was filed fraudulently we are not enclosing the fees to withdraw as registered agent. Since we never agreed to be registered agent we do not believe we have to pay to withdraw.

Please do not hesitate to contact me should you need further information.

Very Truly Yours,

  
Michael A. Schnell, CPA

RECEIVED  
2019 JUN 24 PM 3:21  
SEC. OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Card Collaborative International, LLC  
(Name of Corporation)

**DOCUMENT NUMBER:** L14000168643

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike Schnell

(Name of Person)

Pivot, CPAs

(Name of Firm/Company)

238 Ponte Vedra Park Dr, Suite 201

(Address)

Ponte Vedra Beach, FL 32082

(City/State and Zip Code)

For further information concerning this matter, please call:

Mike Schnell

(Name of Person)

at ( 904 ) 280-2053

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Pivot CPA's

(Name of Registered Agent)

hereby resigns as Registered Agent for The Card Collaborative International, LLC


(Name of Corporation)

L14000168643

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Mike Schnell

(Typed or Printed Name)

Partner

(Capacity)

**Fee for filing this document:**

\$87.50 - Active Corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
19 AUG -9 AM 10:03